PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

Approved for use through 1/31/2007. OMB 0551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Papervork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/550,915			ling Date 28/2005	To be Mailed	
	AF	PPLICATION	D – PART I		SMALLENTITY □ OR				HER THAN ALL ENTITY			
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =		
IND (37	DEPENDENT CLAIM CFR 1.16(h))		minus 3 =		•		x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ets of pape 250 (\$125 tional 50 s	rings exceed 100 tion size fee due by) for each ion thereof. See by CFR 1.16(s).								
	MULTIPLE DEPEN	IDENT CLAIM PE	ESENT (3	7 CFR 1.16(j))]]			
* If	the difference in colu	ımn 1 is less than	r "0" in column 2		TOTAL]	TOTAL				
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
Į.	12/15/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
AMENDMENT	Total (37 CFR 1.18(i))	• 20	Minus	 20	= 0	1	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 3	Minus	···3	= 0	1	x \$ =		OR	X \$220=	0	
Ŋ.	Application Size Fee (37 CFR 1.16(s))											
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0				
L		(Column 1)		(Column 2)	(Column 3)							
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,18(i))		Minus		=	1	x \$ =		OR	x s =	·	
AMENDMENT	Independent (37 CFR 1/16(h))		Minus	***	-	1	x \$ =		OR	x \$ =		
蕌	Application Size Fee (37 CFR 1.16(s))					1			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 16	"If the entry in column 1 is less than the entry in column 2, write "or in column 3. "If the "Highest Anthered Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is les											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the LISPTO to process) an application. Confidentiality is overwined by 80 LSC. 1.22 and 37 CFR. 1.14. This collection is estimated to the 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the LUSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U. S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.